

GRANT AWARD APPROVAL FORM

1. OFFICIAL NAME OF GRANT PROGRAM:	Date of SBE Approval of Grant Criteria 2/12/2008								
<div style="display: flex; justify-content: space-between;"><div><u>2008--2009</u> (year) (year)</div><div><u>Secondary CTE Perkins State Leadership</u> (title)</div></div> <p>Type: <input checked="" type="checkbox"/> Initial <input type="checkbox"/> Amendment <input type="checkbox"/> Continuation</p> <p><u>Legislation Authorizing This Grant Program:</u> Carl D. Perkins Career and Technical Education Act of 2006</p> <p><input checked="" type="checkbox"/> Federal Grant: CFDA Number <u>84.048</u> <input type="checkbox"/> State Aid Grant: Section Number _____ <input type="checkbox"/> Other (Private, Foundation)</p>									
2. SBE Priorities, Policies, and Programs that this Grant Supports (This information can be found on the SBE approved grant criteria form.): These grants support the SBE priority to continue to advocate and promote high school reform, with an emphasis on relevance, relationships, and implementation.									
<div style="display: flex; justify-content: space-between;"><div>3. Background/Purpose of Grant Program: The Carl D. Perkins Career and Technical Education Act of 2006, P.L. 109-597, authorizes the Michigan State Board of Education to initiate federally funded activities at the state and local levels for the improvement of career and technical/occupational education programs. These activities are described within the Michigan Carl D. Perkins State Plan 2008-2013. A) Young Women, Strong Leaders B) Youth Engineering & Science (YES!) Expo</div><div>Type of Grant Program: (check one) <input checked="" type="checkbox"/> Competitive <input type="checkbox"/> Formula <input type="checkbox"/> Other: (specify below)</div></div>									
4. Target Population to be Served by Grant: Secondary and community college approved career and technical education (CTE) instructional programs and enrolled CTE students.									
5. Eligible Applicants: Michigan public secondary and postsecondary educational institutions.									
<div style="display: flex; justify-content: space-between;"><div>6. Award Information: Original Award Date: <u>10/1/08</u> Original Award Amount: <u>\$7,000</u></div><div style="text-align: center;">Amendment Date(s): _____ _____ _____</div><div style="text-align: center;">Amendment Amount(s): \$ _____ \$ _____ \$ _____ \$ _____</div><div style="text-align: right;">Total Recommended Award to Date: <u>\$7,000</u></div></div>									
7. Program Office Responsible: <table style="width: 100%; border: none;"><thead><tr><th style="text-align: left;"><u>Office</u></th><th style="text-align: left;"><u>Unit</u></th><th style="text-align: left;"><u>Contact</u></th><th style="text-align: left;"><u>Phone</u></th></tr></thead><tbody><tr><td>Career and Technical Education</td><td>Director's Office</td><td>Patty Cantú</td><td>33373</td></tr></tbody></table>		<u>Office</u>	<u>Unit</u>	<u>Contact</u>	<u>Phone</u>	Career and Technical Education	Director's Office	Patty Cantú	33373
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Career and Technical Education	Director's Office	Patty Cantú	33373						
<div style="display: flex; justify-content: space-between;"><div>This Form Was Prepared by: Kelli Cross</div><div>Phone Number: 51185</div></div> <div style="text-align: right; font-weight: bold; font-size: 1.2em;">RECEIVED</div>									

NOV 07 2008

DEPUTY SUPERINTENDENT
CHIEF ACADEMIC OFFICER

8. OFFICE

Office Director Approval Signature: _____

Phone: 33313

Comments: _____

Date: 11/27/08**9. GRANTS OFFICE**

Grants Office Approval Signature: _____

Comments: _____

Date: 11/6/08☐ Exhibit A Not Required

Exhibit B Not Required

10. DEPUTY SUPERINTENDENT

Deputy Superintendent Approval Signature: _____

Comments: _____

Date: 11-7-08**11. SUPERINTENDENT**

Superintendent Approval Signature: _____

Comments: _____

Date: 11/9/08

INSTRUCTIONS

- A. Complete items 1-8 on this form. The Grants Administration and Coordination Unit will facilitate completion of items 9-11.
- B. **Attach three (3) sets of Exhibits A and B (one original and 2 copies).** Do not staple the pink form nor the originals of Exhibits A and B.
- Exhibit A---List of applicants (alphabetical order) recommended for funding, the amount requested and the amount Recommended to be funded.
- Exhibit B---List of applicants (alphabetical order) not recommended for funding and the amount each requested.
- C. Attach the grant award letters for the Superintendent's signature and the non-award letters for the Service Area Director's signature. The letters should be submitted in the same order given in Exhibit A and/or B. For each final Grant Award Notification letter, a Grant Award Notification form (yellow sheet) also needs to be submitted for the Superintendent's signature.
- D. Transmit Grant Award Approval Form (pink), attachments, and letters to the **Grants Administration and Coordination Unit.**

Note: This process takes, on average, two weeks from the time the packet with the Office Director's signature on it is delivered to the Grants Office, until the time the fully signed packet is routed to the person administering the grant program. This time varies depending upon the number of corrections that are necessary and the availability of all of the signers. It can take longer particularly around holiday times when the signers may be out of the office. Proofread and plan accordingly.

Exhibit A

2008 – 2009 Secondary Perkins State Leadership

Applicants Recommended for Funding

<u>Applicant</u>	<u>Total Requested</u>	<u>Total Recommended Allocation</u>
Michigan Women's Commission	\$5,000	\$5,000
Michigan Technological University	\$2,000	\$2,000
Total Allocation	<u>\$7,000</u>	<u>\$7,000</u>